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PTO/SB/01 (12-97)

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Attorney Docket Number HYG013US **DECLARATION FOR UTILITY OR** Kia Silverbrook **First Named Inventor DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date □ Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) Group Art Unit **Examiner Name** required)

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original,	, first and sole inventor (if only	y one name is listed below) or an original, f	irst and joint inver	ntor (if plural				
names are listed below) of	of the subject matter which is	claimed and for which a pa	atent is sought or	the invention en	titled:				
Shopping Receptacle with In-Built User Interface									
the specification of which (Title of the Invention)									
is attached hereto									
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have re	eviewed and understand the	contents of the above ider		n including the c	• • • •				
amended by any amendme	ent specifically referred to abo	ove.	unos oposines	in, moderning the c	101113, 43				
I acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 CF	R 1.56.					
-									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	py Attached?				
2003901617	Australia	April 7, 2003							
2003901795	Australia	April 15, 2003	1		⊠				
			1 5 1						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s) Filing Date (MM/DD/YYYY)									
Additional provisional application									
			numb	ers are listed or	n a				
			supplemental priority data sheet PTO/SB/02B attached hereto.						
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[Page 1 of 2]

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.	S. Par	ent Applicat Numl		PCT Parent	t			ing Date /YYYY)			ent Patent I (if applicat	
Number						(maggine)						
		PCT internationa						 				
As a named inv	entor, I h	ereby appoint the onnected therew	ie followi	ing registered p Customer Num OR Registered pra	nber					▶	oct all business Place Cust Number Bar Label be	omer Code
	Nam	е		Regis	tration		g	Naπ				stration
	Name Number Name Number											
Additional	registere	d practitioner(s)	named c	on supplementa	Registere	d Practition	oner In	formation sh	eet PTO	/SB/020	C attached here	eto.
Direct all corr	espond			ner Number Code Label	240	11		OR	□ c	опевр	ondence add	ress below
Name	Kia S	Silverbrook										
Address	Silve	rbrook Research Pty Ltd										
Address	393	Darling Stre	eet									
City	Balm	ain				Sta	te	NSW	ZIP 2041			
Country	Aust	tralia Telephone 61-2-9818-6633			Fax	Fax 61-2-9555-7762						
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:												
Gi	iven Nar	me (first and m	niddle [i	f anyl)				Family	y Name	or Su	mame	
KIA SILVERBROOK												
Inventor's Signature		Lun ?									Date	March 30, 2004
Residence: (Residence: City Balmain State NSW				Cou	ıntry	Australi	ustralia Citizenship Australi			Australian	
Post Office A	Post Office Address 393 Darling Street											
Post Office Address												
City	Balmain State NSW ZIP 2041 Country Australia					a						
Additional	invento	rs are being n	amed o	on thesu	pplement	al Additi	ional t	nventor(s) s	sheet(s	PTO/	SB/02A attac	ched hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1__ of ___ 1

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])		Family Name or Surname					
PAUL Q		2	LAPSTUN					
Inventor's Signature					Date March 30, 2004			
Residence: City Balmain	State	NSW	_{Country} Australia		Citizenship Norwegian			
Mailing Address 393 Darling Street								
Mailing Address								
City Balmain	NSW	ZIP 2041 Country Australia						
Name of Additional Joint Inventor, if ar	ny:		A petition has been filed	for thi	s unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname					
Inventor' s Signature					Date			
Residence: City	State	,	Country		Citizenship			
Mailing Address								
Mailing Address								
City	State	e	ZIP	Cou	untry			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]		Family Name or Surname						
Inventor' s Signature				Date				
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP	Co	ountry			

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